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FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J67399

(2)

1. Corporation Name

MCGREGOR COOLING, INC.

Principal Place of Business

C/O WILLIAM P. TREPANEY
6240 ARC WAY
FORT MYERS FL 33912
US

Mailing Address

6240 ARC WAY
66 MILDRED DRIVE
FT. MYERS FL 33912
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/14/1987

4. FEI Number

59-2787766

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 6240 Arc Way

27 City & State

28 Ft. Myers, FL

29 33912 30 US

9. Name and Address of Current Registered Agent

TREPANEY, WILLIAM P.
6240 ARC WAY
FORT MYERS FL 33912

10. Name and Address of New Registered Agent

81 Name Maryann M. Trepaney
82 Street Address (P.O. Box Number is Not Acceptable)
6240 Arc Way
83
84 City Fort Myers FL 85 Zip Code 33912

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE MARYANN M. TREPANEY - PRESIDENT DATE April 13, 1998

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME TREPANEY, WILLIAM P.
STREET ADDRESS 6240 ARC WAY
CITY-ST-ZIP FORT MYERS FL

TITLE STD ☐ DELETE

NAME TREPANEY, MARYANN M.
STREET ADDRESS 6240 ARC WAY
CITY-ST-ZIP FORT MYERS FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: MARYANN M. TREPANEY 2/11/98 (94) 375-1800

CR2E034 (10/97)